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PATENT & TRADEMARK OFFICE  
JSC 24

1 FW 3738

ATTORNEY DOCKET NO. RTI 112R IB /1915-13980US03

IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE

In the Application of:  
Bianchi, John R., *et al.*  
Serial No.: 09/941,154  
Filed: August 27, 2001  
For: "Assembled Implant"  
Group Art Unit: 3738  
Examiner: Paul B. Prebilic

CERTIFICATE OF MAILING

I hereby certify that this paper (and all papers referred to herein) is being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on: February 07, 2005

  
Donald J. Pochopien  
Registration No. 32,167  
Attorney for Applicants

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT  
UNDER 37 C.F.R. §1.97(c)

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. §1.97(c), Applicants wish to make of record the references cited in co-pending sister application 09/782,594 from which priority is claimed. A copy of the form PTO/SB/08A as cited in this application is attached and made of record as are two copies of form PTO/SB/08A listing the present application.

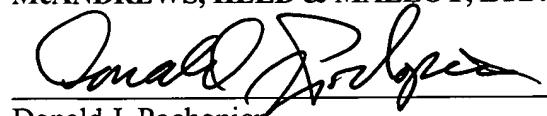
Because this application claims priority from the cited application, wherein a copy of the references was provided and may be found, a copy of each reference is not included in accordance with 37 C.F.R. §1.98(d).

This Second Supplemental Information Disclosure statement is accompanied by a check in the amount of \$180.00 to cover the fee under 37 C.F.R. §1.17(p).

Respectfully submitted,

**McANDREWS, HELD & MALLOY, LTD.**

By:

  
Donald J. Pochopien

Registration No. 32,167

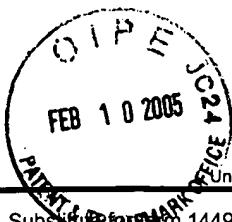
Attorney for Applicants

500 West Madison Street, 34<sup>th</sup> Floor

Chicago, Illinois 60661

(312) 775-8133

Date: February 07, 2005



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Substitution Form 1449A/PTO

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

<i>Complete if Known</i>	
<u>Application Number</u>	09/941,154
<u>Filing Date</u>	08/27/2001
<u>First Named Inventor</u>	John R. Bianchi, et al.
<u>Group Art Unit</u>	3738
<u>Examiner Name</u>	Paul B. Prebilic
<u>Attorney Docket No.</u>	RTI 112R IB/ 1915-13980US03

## U.S. PATENT DOCUMENTS

Examiner Initial*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (if known)			
	A1	5,676,700	10-14-1997	Black et al.	
	A2	5,814,084	09-29-1998	Grivas et al.	
	A3	5,899,939	05-04-1999	Boyce et al.	
	A4	6,025,538	02-15-2000	Yaccarino, III.	
	A5	6,090,998	07-18-2000	Grooms et al.	
	A6	6,200,347	03-13-2001	Anderson et al.	
	A7				
	A8				
	A9				
	A10				
	A11				
	A12				

## FOREIGN PATENT DOCUMENTS

EXAMINER SIGNATURE		DATE CONSIDERED	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard St. 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.

**\*Applicant is to place a check mark here if English language Translation is attached.**  
This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450 Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Substitute for form 1449A/PTO

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

*(use as many sheets as necessary)*

Sheet 1 of 1

<b>Complete if Known</b>	
<b>Application Number</b>	09/941,154
<b>Filing Date</b>	08/27/2001
<b>First Named Inventor</b>	John R. Bianchi, et al.
<b>Group Art Unit</b>	3738
<b>Examiner Name</b>	Paul B. Prebilic
<b>Attorney Docket No.</b>	RTI 112R IB/ 1915-13980US03

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	A1	5,676,700	10-14-1997	Black et al.	
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	A7				
	A8				
	A9				
	A10				
	A11				
	A12				

## FOREIGN PATENT DOCUMENTS

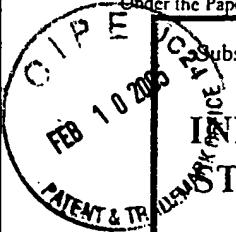
EXAMINER SIGNATURE		DATE CONSIDERED	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard St. 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.

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This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450 Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Substitute for form 1449A/PTO

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

*(use as many sheets as necessary.)*

Sheet

1

of

2

<p>Substitute for form 1449A/PTO</p> <p><b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b></p> <p><i>(use as many sheets as necessary.)</i></p>				<p><i>Complete if Known</i></p>		
<p>Sheet</p>		<p>1</p>	<p>of</p>	<p>2</p>	<p>Application Number</p>	09/782,594
					<p>Filing Date</p>	2/12/2001
					<p>First Named Inventor</p>	Bianchi <i>et al.</i>
					<p>Group Art Unit</p>	1615
					<p>Examiner Name</p>	Unknown
					<p>Attorney Docket Number</p>	RTI-112R

## U.S. PATENT DOCUMENTS

## FOREIGN PATENT DOCUMENTS

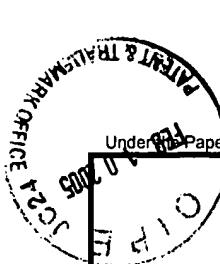
Examiner Signature		Date Considered	
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**\*EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP (619). Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> unique citation designation number. <sup>2</sup>See attached *Kinds of U.S. Patent Documents*. <sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST 3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7

Application Number

09/941,154

Filing Date

08/27/2001

First Named Inventor

John R. Bianchi, et al.

Art Unit

3738

Examiner Name

Paul B. Prebilic

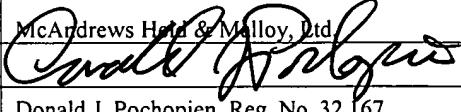
Attorney Docket Number

RTI 112R IB/  
1915-13980US03

## ENCLOSURES (check all that apply)

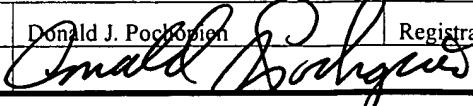
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached - \$180.00 <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Second Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> 2 Copies of Form PTO/SB/08A <input checked="" type="checkbox"/> Copy of PTO/SB/08A from sister application <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	McAndrews Held & Malloy, Ltd.		
Signature			
Printed Name	Donald J. Pochopien, Reg. No. 32,167		
Date	February 7, 2005		

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 02/07/2005.

Name (Print/type)	Donald J. Pochopien	Registration No. (Attorney/Agent)	32,167
Signature			
	Date 02/07/2005		

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**FEES PURSUANT TO THE CONSOLIDATED APPROPRIATES ACT, 2005 (H.R. 4818)**  
**Effective on 12/08/2004.**  
**FEES TRANSMITTAL**  
**for FY 2005**

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 180.00) **Attorney Docket No.** RTI 112R IB/1915-13980US03

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

Charge Fee(s) indicated below  Charge Fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fees(s)  Credit any overpayments under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid(\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee(\$)</u>	<u>Fee(\$)</u>	<u>Small Entity Fee(\$)</u>	<u>Fee(\$)</u>	<u>Small Entity Fee(\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

Fee Description

Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent

Small Entity  
Fee(\$) Fee(\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
-20 or HP	x	=		<u>Fee</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee</u> <u>Fee Paid (\$)</u>
-3 or HP	x	=		

HP = highest number of independent claims paid for, if greater than 3

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

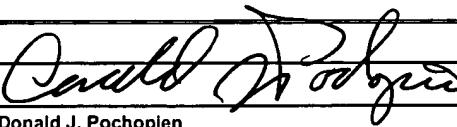
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee(\$)</u>	<u>Fee Paid(\$)</u>
-100	/50	(round up to a whole number)	x	=

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Fee Paid(\$)

Other: Fee under 37 CFR §1.117(p) 180.00

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	32,167	Telephone	(312)775-8000
Name (print/type)	Donald J. Pochoplen		Date	02/07/2005	